PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

naintenance fee notificat	ions.		<u> </u>	·				
CURRENT CORRESPONDE	ENCE ADDRESS (Note: Use Blo	Fee(s) Transmittal, Thi	s certificate c l paper, such	annot be used for as an assignment	domestic mailings of the any other accompanying or formal drawing, must		
207	7590 11/14/	2007					1	
WEINGARTE TEN POST OFF BOSTON, MA	ICE SQUARE	GAGNEBIN & LE	POTELLP I he State addr trans	Cer reby certify that th es Postal Service w essed to the Mail smitted to the USP	is Fee(s) Trar ith sufficient Stop, ISSUE	ailing or Transmi nsmittal is being d postage for first c FEE address ab -2885, on the date	eposited with the United class mail in an envelope	
		F	EB 0 4 2008	Constanc	e Clark	Gagnebin	(Depositor's name)	
		12	\$	Consta	nce 1	Doub.	Packen (Signature)	
		(d)	The state of the s	February	1, 200	8	(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR		ATTORNEY	DOCKET NO.	CONFIRMATION NO.	
09/628,880	09/628,880 07/31/2000		James S. Rosen		COMET-003XX		4970	
FITLE OF INVENTION	: SYSTEM AND METH	OD FOR ENABLING IN	NFORMATION ASSOCIA	TIONS				
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSU	E FEE TOT	AL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$720	\$0		/05/2098 A	VIRINHI 00000	02/14/2008 042	
EXAMINER		ART UNIT	CLASS-SUBCLASS] 65 81	FC:2501 FC:8001		72 0. 00 OP	
DINH, KHANH Q		2151	709-202000				15.00 00	
 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. 			(1) the names of up to or agents OR, alternative (2) the name of a single registered attorney or a 2 registered patent atto	2. For printing on the patent front page, list (!) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Weingarten, Schurgin, Gagnebin & Lebovici LLI 3				
		A TO BE PRINTED ON	I THE PATENT (print or ty	pe)				
			data will appear on the p T a substitute for filing an		ee is identifi	ed below, the doc	ument has been filed for	
(A) NAME OF ASSI		(B) RESIDENCE: (CITY						
MIVA DIRECT,	INC.		New York, N	ew York				
Please check the appropr	iate assignee category or	categories (will not be pr	rinted on the patent) :	Individual 🚨 C	orporation or	other private grou	p entity Government	
4a. The following fee(s) 3 Issue Fee Publication Fee (N Advance Order -	lo small entity discount p	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-0804 (enclose an extra copy of this form).						
5. Change in Entity Sta								
• • •	s SMALL ENTITY state		b. Applicant is no lon					
NOTE: The Issue Fee an interest as shown by the	records of the United Sta	uired) will not be accepte	d from anyone other than to Office.	the applicant; a reg	attorne	ey or agent; or the	assignee or other party in	
Authorized Signature	fit p	stop:		Date <u>Fe</u>	bruary	1, 2008		
Typed or printed nam	veVictor	B. Lebovici		Registration ?	No30	,864		
This collection of inform	nation is required by 37 (FR 1.311. The informati	on is required to obtain or	retain a benefit by	the public wh	ich is to file (and t	by the USPTO to process)	

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.